

Disability Permit/License Plate Application

Office Use Only Expiration Date: Permit #s:

See page 2 for instructions

1003 Buckskin Drive Deer Lodge, MT 59/22-23/1 ◆ Pho	one (406) 846-6000	Fax (406) 846-6039 ● <u>mv</u>	<u>atitieinfo@mt.gov</u>		
Applicant's Legal Name (first, middle, last) or Organization Name please print clearly		Date of Birth	Driver License Number		
Mailing Address please print clearly	City or Town		State	Zip	
I understand that I am eligible for one special parking permit and/or one set of license plates for each non-commercial motor vehicle I own. If I do not own a motor vehicle, I may receive only one special parking permit.					
Number of permits *** See page 2 for Special License Plate information *** Depleasment permit give expiration date or permit number of original permit.					
Replacement permit - give expiration date or permit number of original permit: I have read pages 1 and 2 of this form and agree to comply with all the requirements for the permit or license plate.					
Madical Cartification for Individual					
Medical Certification for Individual *** This part must be completed by a licensed Physician, Chiropractor or Advance Practice Registered Nurse ***					
The Department of Justice shall issue a special parking permit to a person who has a disability that limits or impairs his/her mobility (Section 49-4-301, MCA, Eligibility for Special Parking Permit). The applicant must meet one or more of the following criteria (Section 37-8-202, MCA): cannot walk 200 feet without stopping to rest; is severely limited in ability to walk because of an arthritic, neurological, or orthopedic condition; is so severely disabled that the person cannot walk without the use of or assistance from a brace, cane, another person, prosthetic device, wheelchair, or					
 other assistive device; uses portable oxygen; is restricted by lung disease to the extent that forced expiratory respiratory volume, when measured by spirometry, is less than 1 liter per second or the arterial oxygen tension is less than 60 mm/hg on room air at rest; has impairment because of cardiovascular disease or a cardiac condition to the extent that the person's functional limitations are classified as class III or IV under standards accepted by the American Heart Association; has a disability resulting from an acute sensitivity to automobile emissions or from another disease or physical condition that limits or impairs the person's mobility and that is documented by the licensed physician, the licensed chiropractor, or the licensed advance practice registered nurse as being comparable in severity to the other conditions listed in this subsection (1). A person whose condition is expected to improve within 6 months will be issued a temporary permit for a period not to exceed 6 months. If the condition exists after 6 months, an extended temporary permit may be issued not to exceed 24 months. 					
I certify that, based on the criteria listed above, the applicant is qualified for (check one): Permanent permit (3-year period) Extended temporary permit (period of months, not to exceed 24 months)					
Physician/Chiropractor/Advance Practice Registered Nurse Printed Name	Type of Physician		Professional Licer	nse Number	
Physician/Chiropractor/Advance Practice Registered Nurse Address City			State and Zip Code	}	
→ X Physician/Chiropractor/Advance Practice Registered Nurse Signature	Date	T	elephone Number		
Organization The Department of Justice may issue special parking permits to an agency or business that provides transportation as a service for people with disabilities. The permits must be used only to load and unload people with disabilities. Type of Organization (check one): Skilled Nursing Facility Nursing Home Intermediate Care Facility Other, explain: We are applying for permit(s)					
I certify that I represent an agency, business or long-term care facility that provides transportation as a service for people with disabilities (Section 49-4-301, MCA) and that I have full authority to sign for this agency, business or facility (Section 49-4-302, MCA).					
Signature	Position Title	Position Title			
Printed Name	Date	Talar	nhone Number		

Mail your completed application to:

Title and Registration Bureau 1003 Buckskin Drive Deer Lodge, Montana, 59722-2371

Incomplete applications delay processing -- please double check before mailing

A licensed Physician, Chiropractor, or Advance Practice Registered Nurse must complete the "Medical Certification for Individual" on Page 1

Special Parking Permit -- Conditions and Restrictions

- Each special parking permit is nontransferable. It is unlawful for the cardholder to loan a special parking permit to any person for any reason, regardless of whether the recipient is disabled.
- The special parking permit shall be displayed in the parked vehicle on the dashboard on the side nearest the curb or roadside, or suspended from the rear-view mirror, when parking in a disabled person's parking location so as to be in plain view of any person looking through the windshield of the vehicle from the sidewalk or roadside. Remove permit from mirror when vehicle is in motion.
- Any fraudulent or other misuse of the special parking permit may result in withdrawal of the permit from the holder.
- A special parking permit shall be surrendered to the issuing authority upon the death of the cardholder or when the holder is no longer disabled.
- Permanent permits expire 3 years from the date of issuance and are valid until the last day of the month indicated on the permit.
- To renew a special parking permit, submit a new application signed by a licensed physician, chiropractor, or advance practice registered nurse prior to the expiration date.
- If a special parking permit is lost or mutilated, a replacement may be obtained upon request.

Special License Plates -- Section 61-3-332 (11), MCA

- A Montana resident who is eligible to receive a special parking permit under 49-4-301 may, upon written application on a form prescribed by the department, be issued a special license plate with a design or decal bearing a representation of a wheelchair as the symbol of a person with a disability. If the vehicle to which the license plate is attached is permanently registered, the owner of the vehicle shall maintain evidence of continued eligibility to use the license plate, which must be attached to the registration document in the vehicle.
- Special license plates are obtained from your county treasurer's office. A permanent parking permit may be used as proof that you are approved with the state office. You must be the registered owner of the vehicle before applying for disabled plates.